



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office  
Address: COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
www.uspto.gov

\*BIBDATASHEET\*

Bib Data Sheet

CONFIRMATION NO. 4686

SERIAL NUMBER 10/628,475	FILING DATE 07/29/2003  RULE	CLASS 424	GROUP ART UNIT 1615	ATTORNEY DOCKET NO. AJC 201.1 US/10304772
-----------------------------	---------------------------------------	--------------	------------------------	--

APPLICANTS

Joseph D. Artiss, Windsor, CANADA;  
  
Catherine Jen, Bloomfield Hills, MI;

\*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/486,440 07/14/2003  
and claims benefit of 60/461,847 04/11/2003  
and claims benefit of 60/404,366 08/19/2002

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

*bf*  
*af* **NONE**

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
\*\* 10/30/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>MB</i> Examiner's Signature <i>af</i> Initials	STATE OR  COUNTRY CANADA	SHEETS  DRAWING 8	TOTAL  CLAIMS 61	INDEPENDENT  CLAIMS 11
--	---	-----------------------------------	----------------------------	---------------------------	---------------------------------

ADDRESS  
Mary Anne Schofield  
Fulbright & Jaworski L.L.P.  
801 Pennsylvania Avenue, N.W.  
Washington , DC  
20004

TITLE  
Compositions comprising dietary fat complexer and methods for their use

FILING FEE  RECEIVED 1080	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input checked="" type="checkbox"/> 1.16 Fees ( Filing ) <input checked="" type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input checked="" type="checkbox"/> 1.18 Fees ( Issue ) <input checked="" type="checkbox"/> Other _____ <input checked="" type="checkbox"/> Credit
------------------------------------	---	--